

| POSITION                  | INITIALS | ID NO.      | DATE                |
|---------------------------|----------|-------------|---------------------|
| FEE DETERMINATION         |          |             |                     |
| O.I.P.E. CLASSIFIER       |          |             |                     |
| FORMALITY REVIEW          |          | 535         | 10-17-01            |
| RESPONSE FORMALITY REVIEW | Res      | 1091<br>647 | 3/05/02<br>04/08/02 |

### INDEX OF CLAIMS

Rejected ..... N ..... Non-elected  
 Allowed ..... I ..... Interference  
 (Through numeral) Canceled ..... A ..... Appeal  
 Restricted ..... O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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525  
886  
10/10/01